



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
SECTION FOR CHILD CARE REGULATION
PROGRAM EVALUATION QUESTIONNAIRE

OFFICE USE ONLY

DVN

INSTRUCTIONS

To determine regulatory status for exempt or license-exempt child care programs, complete this form and return to:
Section for Child Care Regulation,
PO Box 570, Jefferson City, MO 65102
Fax: (573) 526-5345

IDENTIFYING INFORMATION

Name of Program

Program Address (Street, City, State, Zip Code)

County

Mailing Address (Street, City, State, Zip Code)

Facility Phone Number

Web Address

E-mail Address

ADMINISTRATION

Name of Owner(s), Organization, or Corporation operating the program

Address (Street, City, State, Zip Code)

Telephone Number

Contact Person (Name and Title)

Telephone Number

PROGRAM INFORMATION

Is the program currently in operation?

☐ Yes, date operation began _____ ☐ No, target opening date _____

Number of Children

Age Range of Children

Hours of Operation

_____ Through _____

From _____ to _____

From _____ to _____

Days of Operation (check any that apply)

☐ Sun ☐ Mon ☐ Tue ☐ Wed ☐ Thu ☐ Fri ☐ Sat

Months of Operation (check any that apply)

☐ All 12 Months ☐ Jan ☐ Feb ☐ Mar ☐ Apr ☐ May ☐ Jun ☐ Jul ☐ Aug ☐ Sep ☐ Oct ☐ Nov ☐ Dec

Maximum number of hours a child may attend each day

Number of employees' children enrolled in the program

Explain how you are/will be compensated for providing your service; this can include any type of funding received.

Explain what type of activities your program will offer.

Does this owner or organization operate any other child care program?

☐ Yes ☐ No

If Yes, provide, DVN, and address of program _____

Are there other regulated child care programs located within the same building? ☐ Yes ☐ No

If yes, provide a diagram of the building, identifying the locations of each child care program.

SUPPORTING DOCUMENTS & REGULATORY STATUS

The following documents must be submitted with the completed questionnaire. Additional documents may be required as noted under each regulatory status.

- Parent policies, handbook, registration and enrollment form. This must include:
 - ❖ A description of the program.
 - ❖ A written explanation of the disciplinary philosophy.
 - ❖ A copy of the form parents sign indicating they are aware that the program is exempt from licensure.
- Organizational Chart. This chart must show the structure of the administrative lines of authority between the child care program and the individual or organization that owns/operate the program.

Check the Regulatory Status of your program.

- ☐ **Religious Organization.** A church, synagogue or mosque; an entity that has or would qualify for federal tax-exempt status as a nonprofit religious organization under Section 501(c) of the Internal Revenue Code; or an entity whose real estate on which the child-care facility is located is exempt from taxation because it is used for religious purposes.
Additional document required:
- Evidence that the administration is a religious organization
- ☐ **Nursery School.** Program for preschool children that is operated for no more than four (4) hours per child per day.
- ☐ **Public School.** Program operated by a public school system, elementary or secondary school.
- ☐ **Religious School.** Program operated by a religious organization, elementary or secondary school.
Additional document required:
- Evidence that the administration is a religious organization
- ☐ **Private School.** Program operated by a private organization, elementary or secondary school.
Additional documents required:
- Completion of the School Review Form.
 - A copy of the school's transcripts, as evidence that a student enrolled will be accepted by another school for transfer.
- ☐ **Montessori School.** Program operated by a school that subscribes to Maria Montessori's educational philosophy.
Additional document required:
- A copy of documentation that the school is accredited by the American Montessori Society or the Association Montessori Internationale.
- ☐ **Summer Camp.** Program operated from May to September by a person or organization with the primary function of providing a summer recreational program for children no younger than five (5) years of age, and providing no care for children younger than five (5) years of age in the same building or in the same outdoor play area.
- ☐ **Religious Organization Academic Preschool.** A child care program exclusively for four (4) and five (5) year old children that is operated by a religious organization.
Additional document required:
- Evidence that the administration is a religious organization.
- ☐ **Business of convenience of its customers.** Business establishment which provides child care as a convenience for its customers or its employees for no more than four hours per day.
- ☐ **Department of Mental Health.** Licensed by the Department of Mental Health which provides care, treatment and diagnosis of mental disorder, mental illness, mental retardation or development disability.
Additional document required:
- A copy of the license issued by the Department of Mental Health
- ☐ **Neighborhood Youth Development Program.** Program provides activities designed for recreational, educational and character building purposes for children six (6) to seventeen (17) years of age and is affiliated and in good standing with a national congressionally chartered organizations standards under Title 36, Public Law 105-225.
Additional document required:
- A copy of documentation showing that the program is affiliated and in good standing with a national congressionally chartered organization's standards under Title 36, Public Law 105,225

SIGNATURES The undersigned are responsible for the information on this form and affirm that the information is true and accurate.

NAME OF THE DIRECTOR OF THE PROGRAM (PLEASE PRINT)

SIGNATURE OF THE DIRECTOR

DATE

NAME AND TITLE OF THE OWNER(S)/BOARD PRESIDENT/ADMINISTRATOR/DESIGNEE (PLEASE PRINT)

SIGNATURE OF THE OWNER(S)/BOARD PRESIDENT/ADMINISTRATOR/DESIGNEE

DATE